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| **Company Name:**  Site: | |  | COSHH  Assessment | |
|  |  |  |  |  |
| Supplier: |  | | COSHH Number | 05 |
|  |  | | | page 1 |
| Assessment By: | Activity: | | Review Date | Assessment Date |
|  | Refueling mobile plant | |  |  |
|  | Persons/Groups at Risk | |  |  |
|  | Site operatives/ other contractors/plant operators | |  |  |

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| **NAME OF HAZARDOUS SUBSTANCE USED OR CREATED** |
| **Substance: Gasoil** |

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| Flammable | |  | Oxidising | |  |  | |  | http://www.hse.gov.uk/chemical-classification/images/pictogram-gallery/irritant.gif | |  | Health hazard | |  | Corrosive | | |
| **FLAMMABLE** | |  | **OXIDISING** | |  | **EXPLOSIVE** | |  | **IRRITANT** | |  | **HARMFUL** | |  | **CORROSIVE** | | |
| **YES** | **NO** |  | **YES** | **NO** |  | **YES** | **NO** |  | **YES** | **NO** |  | **YES** | **NO** |  | **YES** | NO | |
| **✓** |  |  |  |  |  |  |  |  | **✓** |  |  | **✓** |  |  |  |  | |
| Insert ✓ in appropriate boxes | | | | | | | | | | | | | | | | | |
|  | |  | Toxic | |  |  | |  |  | |  |  | |  |  | | |
| **COMPRESSED GAS** | |  | **TOXIC** | |  | **HARMFUL TO THE EINVIRONMENT** | |  |  | |  |  | |  |  | | |
| **YES** | **NO** |  | **YES** | **NO** |  | **YES** | **NO** |  | **YES** | **NO** |  | **YES** | **NO** |  | **YES** | NO | |
|  |  |  |  |  |  | **✓** |  |  |  |  |  |  |  |  |  |  | |
| Insert ✓ in appropriate boxes | | | | | | | | | | | | | | | | | |

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| Please add comments into boxes where required. | | Insert ✓ in appropriate boxes | | **YES** | **NO** | |
| Is Manufacturers Safety Data Sheet available? | | |  | ✓ |  | |
| Does the Substance have a Workplace Exposure Limit (WEL)? | | |  | ✓ |  | |
| If the substance has a WEL please state. if un-sure check HSE document – EH40 | | | 5 mg/m3 per 8 hour | ✓ |  | |
| Can a safer substance be used or can the substance be enclosed or extracted. | | |  |  | ✓ | |
| Will employees be given information and training? | | |  | ✓ |  | |
| Will Personal Protective Equipment be provided for employees? | | |  | | | |
| State the standard of RPE (respirators) | | | Not necessary in well ventilated areas |  | ✓ | |
| State the standard of Goggles or Spectacles | | | BS EN166 safety glasses | ✓ |  | |
| State the standard of Gloves | | | Nitrile/PVC gloves to be worn | ✓ |  | |
| State the standard of Overalls | | |  |  | ✓ | |
| State the standard of Boots | | | BS EN345 | ✓ |  | |
| Other Equipment | | | Attach details if YES |  | ✓ | |
| Will Exposure Monitoring and/or Control Measures be required? | | | Attach details if YES |  | ✓ | |
| Will Health Surveillance be necessary? | | | Attach details if YES |  | ✓ | |
| Does this Substance need to be disposed of by a Waste Disposal Contractor? | | | | ✓ |  | |
| Have all necessary First-aid requirements been provided? | | |  | ✓ |  | |
| Have Storage requirements for the substance been provided/arranged on site? | | |  | ✓ |  | |
| **FIRST AID, FIRE FIGHTING, STORAGE & HANDLING, DISPOSAL AND ACCIDENTAL RELEASE INSTRUCTIONS ARE PROVIDED ON PAGES 2 & 3** | | | **Number of Sheets attached to this Assessment** | | |  |
| FIRST AID INSTRUCTIONS | | | | | | |
| **Route of Exposure, or**  **Type of Injury** | **First Aid Treatment** | | | | | |
| Skin Contact | Immediately remove contaminated clothing and wash before re-use. Wash the skin immediately with soap and water. Get medical attention if any discomfort continues. | | | | | |
| Eye Contact | Promptly wash eyes with plenty of water or eye wash solution while lifting the eyelids .If possible remove any contact lenses and continue to wash. Get medical attention immediately. | | | | | |
| Inhalation | Remove victim immediately from source of exposure. Provide rest, warmth and fresh air. Get medical attention if any discomfort continues. | | | | | |
| Ingestion | Do not induce vomiting. Immediately rinse mouth and drink plenty of water. Get medical attention immediately | | | | | |
| General Information | Treatment should in general be symptomatic and directed to relieving any effects.  Aspiration of the product is unlikely to occur except as the result of ingestion, followed by vomiting or  regurgitation in a partially or totally unconscious individual, when immediate effects are most likely to  result from the aspiration of acidic stomach contents. If it should occur, transport casualty immediately  to hospital. | | | | | |

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| **FIRE FIGHTING MEASURES** | |
| **Hazard** | **Measures** |
| Fire | Extinguish with Dry Powder, Foam or Water Fog. Do not use water jets.  Fires in closed or confined spaces should be tackled by trained personnel who should wear breathing apparatus. |
| Stability | Stable under normal temperature conditions. May react with strong oxidising materials. |
| Decomposition Products | thermal decomposition may lead to the formation of a multiplicity of compounds some of which may be hazardous. With incomplete combustion smoke and hazardous fumes and gases, including carbon monoxide may be formed. |

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| **MANUFACTURERS INFORMATION** | |
| **Manufacturers Name and Address** | Millers Oils Ltd  Hillside Oil Works  Rastrick Common  Brighouse  West Yorkshire  HD6 3DP |
| **Manufacturers Health & Safety Data Sheet Reference** | **2486-1** |
| **24 Hour Emergency Telephone Number** | 01484 713201 |
| **Regulatory Information: Warning Label Phrases** | Classification: Harmful. Dangerous for the environment  H351 - Suspected of causing cancer  H304 - May be fatal if swallowed and enters airways  EUH066 - Repeated exposure may cause skin dryness or cracking  H411 - Toxic to aquatic life with long lasting effects  P102 - Keep out of the reach of children  P370 - In case of fire  P101 - In case of accident or if you feel unwell, seek medical advice immediately (show label where possible)  P280 - Wear suitable protective clothing and gloves  P273 - Avoid release to the environment. Refer to special instructions/Safety Data Sheet  P331 - If swallowed, do not induce vomiting: seek medical advice immediately and show this container or label |

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| **STORAGE AND HANDLING** | |
| **Hazard** | **Measures** |
| Handling | **Eyes:** Avoid contact with eyes. If splashing is likely to occur wear a full face visor or chemical  goggles to BSI standards as appropriate.  **Skin:** Avoid frequent or prolonged skin contact with fresh or used product. Good working practices,  high standards of personal hygiene and plant cleanliness must be maintained at all times. Wash hands  thoroughly after contact. The use of a recommended barrier cream on the hands before commencing  work may be helpful in assisting subsequent removal of any product accidentally contaminating the  skin. After washing the application of a suitable conditioning cream may help to prevent cracking,  fissuring or dryness of the skin. Use disposable cloths and discard when soiled. Do not put soiled  cloths into pockets.  **Fire Prevention:** Product soaked rags, paper or material used to absorb spillages, represent a fire  hazard, and should not be allowed to accumulate. Dispose of safely immediately after use. |
| Storage | Store under cover away from heat and sources of ignition. |

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| DISPOSAL MEASURES | |
| **Hazard** | Measures |
| Pollution of water courses or drains | Where possible, arrange for product to be recycled. Dispose of via an authorised person/licensed waste disposal contractor in accordance with local regulations. Dispose of product and container carefully and responsibly. Do not dispose of near ponds, ditches, down drains or onto soil. |

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| ACCIDENTAL RELEASE MEASURES | |
| **Hazard** | Measures |
| Spillage | May cause damage to surfaces making them SLIPPERY.  Contain spillage - do not wash spillage down drain. Absorb using absorbent clay, diatomaceous clay or other suitable absorbent. |

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| USAGE/EXPOSURE | |
| **Frequency and Duration of use** |  |
| **Maximum number of people involved in activity** |  |
| **Quantities stored/used** |  |
| **Exposure levels** |  |

**Safe System of Work**

1. Wash at the end of each work shift and before eating, smoking and using the toilet.

2. Place drip tray under vehicle to be topped up where possible. Ensure spill kit is close at hand.

3. Ensure PVC/Nitrile gloves are worn.

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**Operatives Acknowledgement**

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| **Name:** | **Signature:** | **Date:** | **Name:** | **Signature:** | **Date:** |
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